

**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:** Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

# FEE TRANSMITTAL for FY 1999

Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

TOTAL AMOUNT OF PAYMENT (\$)**760.00**

## Complete if Known

Application Number  
Filing Date **December 22, 1999**  
First Named Inventor **Gerard Gundling**  
Examiner Name  
Group / Art Unit  
Attorney Docket No. **6653.US.01**

## METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number **01-0025**  
Deposit Account Name **Abbott Laboratories**

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

2. ☐ Payment Enclosed:  
☐ Check ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 760 201 380		Utility filing fee	<b>760.00</b>
106 310 206 155		Design filing fee	
107 480 207 240		Plant filing fee	
108 760 208 380		Reissue filing fee	
114 150 214 75		Provisional filing fee	

SUBTOTAL (1) (\$)**760.00**

### 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
11	-20** = 0		
Independent Claims	2	-3** = 0	
Multiple Dependent			<b>0.00</b>

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18 203 9		Claims in excess of 20
102 78 202 39		Independent claims in excess of 3
104 260 204 130		Multiple dependent claim, if not paid
109 78 209 39		** Reissue independent claims over original patent
110 18 210 9		** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130 205 65		Surcharge - late filing fee or oath	<b>0.00</b>
127 50 227 25		Surcharge - late provisional filing fee or cover sheet.	<b>0.00</b>
139 130 139 130		Non-English specification	<b>0.00</b>
147 2,520 147 2,520		For filing a request for reexamination	<b>0.00</b>
112 920* 112 920*		Requesting publication of SIR prior to Examiner action	<b>0.00</b>
113 1,840* 113 1,840*		Requesting publication of SIR after Examiner action	<b>0.00</b>
115 110 215 55		Extension for reply within first month	<b>0.00</b>
116 380 216 190		Extension for reply within second month	<b>0.00</b>
117 870 217 435		Extension for reply within third month	<b>0.00</b>
118 1,360 218 680		Extension for reply within fourth month	<b>0.00</b>
128 1,850 228 925		Extension for reply within fifth month	<b>0.00</b>
119 300 219 150		Notice of Appeal	<b>0.00</b>
120 300 220 150		Filing a brief in support of an appeal	<b>0.00</b>
121 260 221 130		Request for oral hearing	<b>0.00</b>
138 1,510 138 1,510		Petition to institute a public use proceeding	<b>0.00</b>
140 110 240 55		Petition to revive - unavoidable	<b>0.00</b>
141 1,210 241 605		Petition to revive - unintentional	<b>0.00</b>
142 1,210 242 605		Utility issue fee (or reissue)	<b>0.00</b>
143 430 243 215		Design issue fee	<b>0.00</b>
144 580 244 290		Plant issue fee	<b>0.00</b>
122 130 122 130		Petitions to the Commissioner	<b>0.00</b>
123 50 123 50		Petitions related to provisional applications	<b>0.00</b>
126 240 126 240		Submission of Information Disclosure Stmt	<b>0.00</b>
581 40 581 40		Recording each patent assignment per property (times number of properties)	<b>0.00</b>
146 760 246 380		Filing a submission after final rejection (37 CFR 1.129(a))	<b>0.00</b>
149 760 249 380		For each additional invention to be examined (37 CFR 1.129(b))	<b>0.00</b>
		Other fee (specify)	<b>0.00</b>
		Other fee (specify)	<b>0.00</b>

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**0.00**

## SUBMITTED BY

Typed or Printed Name **Paul D. Yasger**  
Signature **[Signature]**

Date **12/22/99**

## Complete (if applicable)

Reg. Number **37,477**  
Deposit Account UserID **01-0025**